



Town of Halfmoon  
2 Halfmoon Town Plaza  
Halfmoon, NY 12065  
371-7410 ext. 2267  
Fax: 371-0304  
Planning Department

## Zoning Compliance Letter Application

**Application Fee:**  
Residential: \$25.00  
Non-Residential: \$50.00

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### **I. Property Information:**

Property Address: \_\_\_\_\_

Parcel Identification # (SBL): \_\_\_\_\_

Current Use: ☐ Residential: ☐ Non-Residential

Project/Business Name (if non-residential): \_\_\_\_\_

### **II. Applicant Information:**

Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Fax #: \_\_\_\_\_ Email: \_\_\_\_\_

**II. Property Owner Information:** (If different than Applicant AND the Owner does not sign below, please submit an original, notarized "Owner Authorization" form - attached):

Property Owner: \_\_\_\_\_

If a corporation, responsible party/designated officer: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Fax #: \_\_\_\_\_ Email: \_\_\_\_\_

**Relationship of Applicant to Property Owner (if different; e.g. attorney, real estate agent, etc.):**

**Letter date requested by:** \_\_\_\_\_ (Insert Date). Please allow the Planning Department at least five (5) business days for completion of the letter.

**Applicant/Owner Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_



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**OWNER AUTHORIZATION - ZONING COMPLIANCE LETTER**

The undersigned, who is the owner of the premises known as .....  
....., identified as Tax Map #.....hereby authorizes  
.....to request a Zoning Compliance Letter  
from the Planning Department of the Town of Halfmoon. The undersigned further permits the Town or its  
authorized representative access to the property to review existing site conditions, if necessary.

STATE OF NEW YORK     )  
COUNTY OF SARATOGA   )SS.

On this .....day of .....,Two Thousand and ....., before me,  
the subscriber, personally appeared ..... to me  
personally known and known to me to be the same person described in and who executed  
the within Instrument, and .....he.....acknowledged to me that .....he.....executed the same.

\_\_\_\_\_  
Owner

\_\_\_\_\_  
Notary Public